

National Archives and Records Administration
Requests for Bankruptcy by Mail or Fax

Accession Number: _____

NARA Location Number: Row: _____ Unit: _____ Shelf/Position: _____

Agency Box Number: _____

Case File Name: _____

Case File Number: _____

City and State Where Court is Located:

The National Archives and Records Administration in Kansas City, MO accepts requests for photocopies of bankruptcy case files and forwards the photocopies to the requestor via first class mail or via fax. Fax requests are accepted for Personal (not business or farming) bankruptcy case files.

You must complete the following: Check only 1 option in either A or B.

Option A: The entire contents of the case file.

_____ Mail to you: \$35.00 for up to 70 pages.

_____ Mail to you CERTIFIED: \$41.00 for up to 70 pages.

You will be contacted if your file contains more than 70 pages. These pages may be copied for \$.50/each.

_____ Fax to you: \$35.00 for up to 70 pages.

_____ Faxed and Certified: \$76.00 for up to 70 pages. One full copy is faxed, another is CERTIFIED and Mailed.

Option B: A package containing commonly requested documents. This option includes one or more of the documents listed below. Select documents below, or check all of the above.

☐ Final Decree

☐ Statement of All Liabilities of Debtor including Schedules A1 (D), A2 (E) and A3 (F).

☐ Summary of Debts and Property (Assets)

☐ Trustee's No Asset Report

☐ Debtor's Voluntary Petition

☐ Reaffirmation Agreement(s)

☐ All of the above.

_____ Mail or Fax. (Circle one) \$10.00 for up to 30 pages.

_____ Mailed to you, CERTIFIED: \$16.00, for up to 30 pages.

_____ Faxed and CERTIFIED. One copy is faxed, the other copy is certified and mailed. \$26.00 for up to 30 pages.

Print your name, address and phone number. Include the fax number if you want the documents faxed back to you.

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
DAYTIME PHONE NUMBER: () _____
FAX NUMBER: () _____

If the records are going to be transmitted to a fax machine that is not at your location, list the name of the business, as well as a contact name and phone number (in case of transmittal problems).

You Must Complete the following:

Payment by:

- ☐ Visa
- ☐ Master Card
- ☐ Discover
- ☐ American Express
- ☐ Money Order Payable to N.A.R.A. Trust Fund
- ☐ Personal, pre-printed check payable to N.A.R.A. Trust Fund

Credit Card Number: _____

Expiration Date: _____

Cardholder's Name: _____

Cardholder's Authorization (signature): _____

* If you are paying by credit card, requests may be faxed to NARA at (816)-268-8037.

* If you are paying by check or money order please mail request to:

National Archive and Records Administration
2312 East Bannister Road
Kansas City, MO 64131-3011

There is a 24 hour turn-around period on all requests. Files are retrieved the NEXT business day, then mailed or faxed that afternoon. Please call (816) 268-8000 between the hours of 8:00am through 4:00pm CST, Monday through Friday.

Updated: 09/09/03